


 EB 687832845 US		 EXPRESS MAIL UNITED STATES POSTAL SERVICE®		Customer Copy Label 11-B, March 2004																									
ORIGIN (POSTAL SERVICE USE ONLY) PO ZIP Code: 08831 Day of Delivery: 1904 Postage: \$30.70 Date Accepted: 1904 Scheduled Date of Delivery: 2/23 Return Receipt Fee: \$2.20 Month: 2 Day: 23 Scheduled Time of Delivery: 6:51 PM COD Fee: \$ Insurance Fee: \$ Time Accepted: 6:51 PM Flat Rate or Weight: 1.42 lbs. Int'l Alpha Country Code: 52		DELIVERY (POSTAL USE ONLY) <table border="1"> <tr> <td>Delivery Attempt</td> <td>Time</td> <td><input type="checkbox"/> AM <input type="checkbox"/> PM</td> <td>Employee Signature</td> </tr> <tr> <td>Mo. Day</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Delivery Attempt</td> <td>Time</td> <td><input type="checkbox"/> AM <input type="checkbox"/> PM</td> <td>Employee Signature</td> </tr> <tr> <td>Mo. Day</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Delivery Date</td> <td>Time</td> <td><input type="checkbox"/> AM <input type="checkbox"/> PM</td> <td>Employee Signature</td> </tr> <tr> <td>Mo. Day</td> <td></td> <td></td> <td></td> </tr> </table>				Delivery Attempt	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	Mo. Day				Delivery Attempt	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	Mo. Day				Delivery Date	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	Mo. Day			
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PAYMENT BY ACCOUNT Express Mail Corporate Acct. No. Federal Agency Acct. No. or Postal Service Acct. No.		CUSTOMER USE ONLY WAYER OF SIGNATURE BY ADDRESSEE Signature of Addressee: Attorney General Eric Holder Signature of Sender: [Signature]																											
FROM: (PLEASE PRINT) Mario A. 220, Esq. 185 Gatzmer Ave Jamesburg NJ 08831		TO: (PLEASE PRINT) Attorney General Eric Holder Department of Justice 950 Pennsylvania Ave, N.W. Washington, DC ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES.) 20530 + 0001																											
FOR PICKUP OR TRACKING Visit www.usps.com Call 1-800-222-1811		NO DELIVERY <input checked="" type="checkbox"/> Weekend <input type="checkbox"/> Holiday <input type="checkbox"/> Mailer Signature																											

SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Attorney General Eric Holder Department of Justice 950 Pennsylvania Ave, N.W. Washington, DC 20530-0001		A. Signature X B. Received by (Printed Name) Eric Holder C. Date of Delivery FEB 24 2009	
2. Article Number (Transfer from service label) EB 687832845 US		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
PS Form 3811, February 2004		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

Domestic Return Receipt

102595-02-M-1540